

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>m G</i>		
O.I.P.E. CLASSIFIER			<i>3/14/00</i>
FORMALITY REVIEW	<i>AB</i>	<i>65373</i>	<i>3/14/00</i>
RESPONSE FORMALITY REVIEW			<i>5/1/00</i>

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

*10/20/00*

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If more than 150 claims or 10 actions  
staple additional sheet here

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